

# Work Order ID 96674

**\*96674\***

Page 1

Thursday, January 31, 2013 10:19:55 AM

Item ID: D3684-045 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: LEG ASSEMBLY  
 Start Date: 1/30/2013 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 1/30/2013 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference: DISSASSEMBLE PER ECN 12-693

Approvals: Process Plan: MF Date: 1-31-13 Tooling: Date: Run Start **\*NR1\***  
 QC: Date: SPC (Y/N): Date: Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3684	E

150

0.00

**\*150\***

QC

Quality Control

Memo

0.00

PULL FROM STOCK D3684-045 X 1 B#93690

DISSASSEMBLE AND RETURN TO QC  
 UNDER ORIGINAL BATCH NUMBER PER ECN 12-693  
 \*(MEL WILL CREATE W/O'S TO REWORK PARTS)

DISCARD HARDWARE

MF 1-31-13

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Water Jet <input type="checkbox"/> Engineering <input type="checkbox"/> Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Quality <input type="checkbox"/> Thermoforming <input type="checkbox"/> Finishing <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Other <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/> Supplier <input type="checkbox"/>			
Part No. _____					
NCR No. _____					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio
	<input type="checkbox"/> Grain
	<input type="checkbox"/> Hardware
	<input type="checkbox"/> Inspection Incomplete
	<input type="checkbox"/> Instructions Incomplete/Unclear
	<input type="checkbox"/> Maintenance
	<input type="checkbox"/> Misabeled
	<input type="checkbox"/> Misread
	<input type="checkbox"/> Offset
	<input type="checkbox"/> Out of Calibration
	<input type="checkbox"/> Out of Sequence
	<input type="checkbox"/> Outside Dimensions
	<input type="checkbox"/> Ovalized
	<input type="checkbox"/> Over/Under tolerance
	<input type="checkbox"/> Part Incorrect
	<input type="checkbox"/> Part Lost/Missing
	<input type="checkbox"/> Part Moved
	<input type="checkbox"/> Positioned Wrong
	<input type="checkbox"/> Power Loss/Surge
	<input type="checkbox"/> Pressure/Forced
	<input type="checkbox"/> Temperature/Cure
	<input type="checkbox"/> Weld
	<input type="checkbox"/> Wrong Stock Pulled
	<input type="checkbox"/> Other

# Work Order ID 96674

\*96674\*

Page 2

Thursday, January 31, 2013 10:19:55 AM

Item ID: D3684-045 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: LEG ASSEMBLY  
 Start Date: 1/30/2013 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 1/30/2013 Req'd Qty: 1.00 \*1\* Customer:  
 Reference: DISSASSEMBLE PER ECN 12-693

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160		0.00							
*160*									
Small Fab	Memo	0.00							
Small Fab	DISSASSEMBLE AND BRING BACK TO QC								
	D3688-5 X 1 B#79308								
	D3689-1 X 1 B#83358								
	D3691-1 X 1 B#81733								
	D3692-1 X 4 B#83257								
	D3693-1 X 1 B#83612								
	NAS509-12C x 1 B#121556								
	NAS509-12C x 1 B#121652								
	SCRAP HARDWARE								
170	QC21- Final Inspection - Work Order Release	0.00							
*170*									
QC	Memo	0.00							
Quality Control									

① 0 Ae 13-02-14

MLJ 13-03-08

MF 13-3-7

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

# Picklist Print

Thursday, January 31, 2013 10:19:54 AM

Page 1

Work Order ID: 96674

Parent Item: D3684-045

Parent Item Name: LEG ASSEMBLY

Start Date: 1/30/2013

Required Date: 1/30/2013

Start Qty: 1.00

Required Qty: 1.00

## Comments:

IPP Rev:A new issue 08-02-12 DD verified by:JLM  
 IPP Rev:B As per Rev B 09-01-07 JLM Verified By:EC  
 03-16 JLM VERIFIED BY:EC  
 IPP Rev:C Added sealant note as per Rev C 09-01-20 JLM Verified  
 By:DD  
 DD VERF:JLM  
 IPP REV:C AS PER REV D 10-  
 IPP REV:D 13.01.24 PER ECN12-693

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3684-045 LEG ASSEMBLY		Manufactured	No				Each	0.0000		93690 <sup>1</sup>		MF 13-2-19	
D3688-5 Stud		Manufactured	No				Each	0.0000		79308 <sup>1</sup>		MF 13-2-19	
D3689-1 SLEEVE		Manufactured	No				Each	18.0000		-1			

Location	Loc Qty	Loc Code
FG	2	
(83358)	2	
GA	16	
72117	1	
88239	8	
89987	7	

D3691-1 STUD	Manufactured	No				Each	0.0000			-1		81733 MF 13-2-19	
D3692-1 SPACER	Manufactured	No				Each	427.0000			-4		83257 MF	

Location	Loc Qty	Loc Code
FG	5	
80364	5	
ST062	422	
51467	16	
80364	13	
81729	106	
81961	203	
83257	24	
85415	60	

13-2-19

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Rework  <input type="checkbox"/> Scrap  <input type="checkbox"/> Use-as-is  <input type="checkbox"/> Work Order Update         </div> <div> <input type="checkbox"/> Skid-tube  <input type="checkbox"/> Machining  <input type="checkbox"/> Thermoforming  <input type="checkbox"/> Large Fab         </div> <div> <input type="checkbox"/> Crosstube  <input type="checkbox"/> Small Fab  <input type="checkbox"/> Finishing  <input type="checkbox"/> Composite         </div> <div> <input type="checkbox"/> Water Jet  <input type="checkbox"/> Prod. Eng. Coord.  <input type="checkbox"/> Rec/Store/Packaging  <input type="checkbox"/> Supplier         </div> <div> <input type="checkbox"/> Engineering  <input type="checkbox"/> Quality  <input type="checkbox"/> Other         </div> </div>
--	--

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

Thursday, January 31, 2013 10:19:54 AM

Page 2

Work Order ID: 96674

Parent Item: D3684-045

Parent Item Name: LEG ASSEMBLY

Start Date: 1/30/2013

Required Date: 1/30/2013

Start Qty: 1.00

Required Qty: 1.00

D3693-1

Manufactured No

Each 2.0000

-1

Rod End Bearing

Location

Loc Qty

Loc Code

FG

2

81738

2

83612 MF

13-2-19

NAS509-12C x -1 B# 121556 MF 13-2-19  
NAS509L12C x -1 B# 121652 MF 13-2-19

Thursday, January 31, 2013 10:19:54 AM

Shop Packet Print

Page 2

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div>             Rework <input type="checkbox"/>              Scrap <input type="checkbox"/>              Use-as-is <input type="checkbox"/>              Work Order Update <input type="checkbox"/> </div> <div>             Skid-tube <input type="checkbox"/>              Machining <input type="checkbox"/>              Thermoforming <input type="checkbox"/>              Large Fab <input type="checkbox"/> </div> <div>             Crosstube <input type="checkbox"/>              Small Fab <input type="checkbox"/>              Finishing <input type="checkbox"/>              Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/>              Prod. Eng. Coord. <input type="checkbox"/>              Rec/Store/Packaging <input type="checkbox"/>              Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/>              Quality <input type="checkbox"/>              Other <input type="checkbox"/> </div> </div>	<b>AGAINST DEPARTMENT/PROCESS</b>
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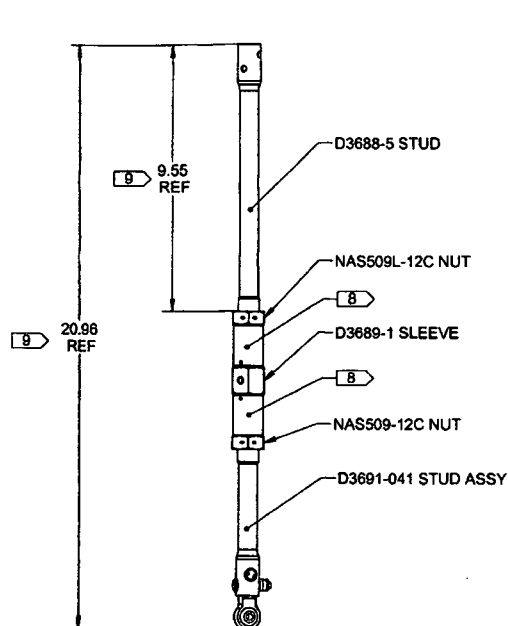
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b>  <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b>  <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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ITEM	QTY .045	PART NUMBER	DESCRIPTION
1	X	D3684-045	INBOARD LEG ASSEMBLY
2	1	D3688-5	STUD
3	1	D3689-1	SLEEVE
4	1	D3691-041	STUD ASSY
5	1	NAS509L-12C	NUT
6	1	NAS509-12C	NUT



**D3684-045 INBOARD LEG ASSEMBLY**

**RELEASED**  
2013-01-22  
*md*

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY WITH DART ASSEMBLY P/N D3684-045 PER DART QSI 044 6.1 ( FINE POINT PAINT MARKER )
- 7) WEIGHT: 3.1 lbs
- 8) USE TECTYL 502C CLASS I, MIL-PRF-16173E GRADE 2 OR EQUIVALENT ANTI-SEIZE COMPOUND ON THREAD
- 9) DIMENSION SHOWN IS WHEN D3688-5 & D3691-041 STUDS ARE FULLY THREADED INTO D3689-1 SLEEVE

DESIGN	RF	<b>DART AEROSPACE LTD</b>	
DRAWN	DB	HAWKESBURY, ONTARIO, CANADA	
CHECKED	MB	DRAWING NO.	REV. E
MFG. APPR.	JLM	D3684	SHEET 3 OF 5
APPROVED	<i>md</i>	TITLE	SCALE
DE APPR.		TRIPOD MOUNT ASSY	NTS
DATE	12.12.05	<small>COPYRIGHT © 2008 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div>Rework <input type="checkbox"/></div> <div>Skid-tube <input type="checkbox"/></div> <div>Crosstube <input type="checkbox"/></div> <div>Water Jet <input type="checkbox"/></div> <div>Engineering <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Scrap <input type="checkbox"/></div> <div>Machining <input type="checkbox"/></div> <div>Small Fab <input type="checkbox"/></div> <div>Prod. Eng. Coord. <input type="checkbox"/></div> <div>Quality <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Use-as-is <input type="checkbox"/></div> <div>Thermoforming <input type="checkbox"/></div> <div>Finishing <input type="checkbox"/></div> <div>Rec/Store/Packaging <input type="checkbox"/></div> <div>Other <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Work Order Update <input type="checkbox"/></div> <div>Large Fab <input type="checkbox"/></div> <div>Composite <input type="checkbox"/></div> <div>Supplier <input type="checkbox"/></div> </div>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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Parent Item ID	Reason	Lot Qty	Lot Nbr	Lot Trans Date
AN3C12A	93690	-2	121259	11/23/2012 8:33
D3688-5	93690	-1	79308	11/23/2012 8:33
D3689-1	93690	-1	83358	11/23/2012 8:33
D3691-1	93690	-1	81733	11/23/2012 8:33
D3692-1	93690	-1	83257	11/23/2012 8:33
D3692-1	93690	-3	83257	12/10/2012 13:28
D3693-1	93690	-1	83612	11/23/2012 8:33
MS21043-3	93690	-1	123525	11/23/2012 8:33
MS21043-3	93690	-1	123525	12/10/2012 13:28
NAS509-12C	93690	-1	121556	11/23/2012 8:33
NAS509L12C	93690	-1	121652	11/23/2012 8:33

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Counter Sink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other